

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>30800</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>214-789-1627</b>	4. Manifest Tracking Number <b>013487464 JJK</b>	
5. Generator's Name and Mailing Address <b>US EPA REGION 6-CES ENVIRONMENTAL 1445 ROSS AVE, SUITE 1200 ATTN: Gary Moore DALLAS, TX 75202 214-789-1627</b>		Generator's Site Address (if different than mailing address) <b>US EPA REGION 6-CES ENVIRONMENTAL 4904 GRIGGS RD Houston, Texas 77021</b>				
6. Transporter 1 Company Name		U.S. EPA ID Number				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address <b>Blue Ridge Landfill Permit #89429 2200 FM 521 Fresno, Texas 281.835.6142</b>		U.S. EPA ID Number <b>SWR #89429</b>				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	<b>NONHAZ CLASS 1 RESIN AND VAC BOX</b>	<b>001</b>	<b>CM</b>		<b>EA</b>	<b>FXG8-403-1</b>
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information <b>REPUBLIC WASTE APPROVAL #51121419885 CUSTOMER # 333354</b> <b>132</b> <b>VB641</b>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name		Signature		Month Day Year		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: _____						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>30900</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>214-789-1627</b>	4. Manifest Tracking Number <b>013487348 JJK</b>	
5. Generator's Name and Mailing Address <b>US EPA REGION 6-CES ENVIRONMENTAL 1445 ROSS AVE, SUITE 1200 ATTN: Gary Moore DALLAS, TX 75202</b>			Generator's Site Address (if different than mailing address) <b>US EPA REGION 6-CES ENVIRONMENTAL 4804 GRIGGS RD Houston, Texas 77021</b>			
Generator's Phone: <b>214-789-1627</b>						
6. Transporter 1 Company Name			U.S. EPA ID Number			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>Blue Ridge Landfill Permit #89429 2200 FM 521 Fresno, Texas 281.835.8142</b>			U.S. EPA ID Number <b>SWR #89429</b>			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	<b>NONHAZ CLASS 1 LIQUIDS FOR SOLIDIFICATION</b>	<b>001</b>	<b>TT</b>		<b>GL</b>	<b>FX8F-207-1</b>
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information <b>REPUBLIC WASTE APPROVAL #51121419794 132</b> <b>V B 607</b> <b>CUSTOMER #</b> _____						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name		Signature			Month	Day Year
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:			Date leaving U.S.:	
Transporter signature (for exports only):						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature			Month	Day Year
Transporter 2 Printed/Typed Name		Signature			Month	Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)					Month	Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature			Month	Day Year